

Transboundary Spill NPDES CA0108928 Order No. R9-2014-0009, Amended by R9-2014-0094

Type A B 5/17/18 (CAL OES 1-800-852-7550)

Name of Person Reporting Spill Carlos Pena

Telephone No. of Person Reporting 619-210-1370

Spill Location/Name Tijuana River at the International Boundary

GPS Coordinates 32.32.30 N, 117.2.18 W

Spill Reached: Drainage Channel Drainage Structure XXX Surface Water

Spill Reached: MS4 MS4 Owner

Vol Spill to MS4 Vol Recovered from MS4

Estimate Spill Volume from All Sources Approx. 208,000 Gallons

Volume That Reached: Surface Water, Drainage Channel, Not Recovered from MS4 Approx. 208,000 Gallons

Total Recovered Volume 0

Number of Spill Appearance Points 1

Appearance Descriptions Slightly Clear Water

Spill Flow: Start Date 01/29/18 Start Time Approximately 1500

Notification: Date 01/29/18 Time 1530

Operator Arrival: Date 01/29/18 Time 1500

Spill Flow: End Date 01/29/18 End Time 1520

Cleanup Completed: Date NA Time

Probable Cause of Spill Electrical Malfunction at Pump Station CILA

Notification of CAL OES Date 01/29/18 Time 1630

CAL OES Control Number 18-0655 Nicki Criger

Description of Spill Flow Destination Tijuana River Channel

Spill Flow Cause Electrical Malfunction at Pump Station CILA

Spill Flow Failure Point Pump Station CILA

Spill Flow Storm Event N/A

Spill Corrective Actions None

Spill Flow Response Actions None

Spill Flow Completion Date 02/04/18

Investigation N/A Reasons Completion Date

Health Warnings Posted Yes x No

Name of Beaches Impacted: None Surface Water Impacted: Tijuana River

Location and No. Of Samples Collected (Type A) N/A Number

Parameters Tested N/A

Regulatory Agencies Receiving Results N/A

Methodology for Spill Volume Estimate Flow Rates at CILA Pump Station

Amount of Spill Recovered

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

Certifying Official Carlos Pena Title Area Operations Manager Date 01/29/18

Signature Carlos Pena